

## **Environmental Health Services Division**

401 Fifth Avenue, Suite 1100 Seattle WA 98104-1818 **206-263-9566** Fax 206-296-0189 TTY Relay: 711

www.kingcounty.gov/health

## **Solid Waste Permit Application**

Code of the King County Board of Health Chapter 10 & WAC 173-350

Permit Number (For official use only)

PART I. General Information			
Application Date	County where facility is located		
Name of Applicant (WAC 173-351-730(7) & King County Board of Health10.05.020 for appropriate evidence of authority):	Applicant is:		
Company Name, Government Entity, etc.:	Facility owner  Facility operator  Other(specify)		
Applicant's Position in Company or Government Entity:			
Applicant Mailing Address:	Applicant phone:		
Street:	Fax:		
City:	e-mail address:		
State: Zip:			
	PART II. Solid Waste Facility Type		
	ties that are included in this permit application.		
(You must complete the applicable PART II forms below for <u>each</u> activity/facility type with this application.)			
Municipal Solid Waste Landfill Unit per chapter 173-351 WAC Research, Development, and Demonstration per chapter 173-351-710 WAC Composting per WAC 173-350-220 Land application per WAC 173-350-230 Energy recovery and incineration per WAC 173-350-240 Anaerobic digesters per WAC 173-350-250 Intermediate solid waste handling per WAC 173-350-310 Material recovery facility Transfer station Bailing and compaction site Drop Box	Piles used for storage or treatment per WAC 173-350-320  Surface impoundment per WAC 173-350-330  Tank per WAC 173-350-330  Waste tire storage per WAC 173-350-350  Moderate risk waste per WAC 173-350-360  Limited purpose landfill per WAC 173-350-400  Inert waste landfill per WAC 173-350-410  Other methods of solid waste handling per WAC 173-350-490 (specify):  Collection/Transportation Vehicle per King County BOH Chapter 10.05.		

PART 3. Solid Waste Activity/Facility Details				
☐ Municipal Solid Waste Landfill Unit				
Attach the following:	Location of Documents			
Engineering plans, reports and specifications per WAC 173-351-730(5)				
Demonstrations that the facility meets the location standards of WAC 173-351-130 and 173-351-140				
Hydrogeologic report and water quality monitoring plan, and demonstrations, prepared in accordance with WAC 173-351-400				
A plan of operations, and demonstrations, meeting the requirements of WAC 173-351-200, 173-351-210 and 173-351-220				
An engineering report comprehensively describing the existing site conditions and an analysis of the facility, including closure, post-closure criteria and any necessary demonstrations per WAC 173-351-730(5)(b)				
An engineering report containing a description of the existing site conditions and an analysis of the proposed facility per WAC 173-351-730(5)(c)				
A construction quality assurance and quality control plan per WAC 173-351-730(6)				
Closure and post-closure plans per WAC 173-351-500				
Documentation per WAC 173-351-730(1)(b)(viii) for managing leachate				
Cost estimates and mechanisms to meet financial assurance per WAC 173-351-600				
Plan for meeting landfill operator certification per chapter 173-300 WAC, Certification of Operators of Solid Waste Incinerator and Landfill Facilities (WAC 173-351-220(4)(b))				
Documentation that owners of property located within 1,000 feet of the landfill boundary have been notified that the proposed facility may impact their ability to construct water supply wells, in accordance with Chapter 173-160 WAC, Minimum Standards for Construction and Maintenance of Wells (WAC 173-351-730(1)(a)(iv))				
Demonstration of how the facility conforms with the approved local comprehensive solid waste management plan				
Additional information required by the jurisdictional health department				

Research, Development and Demonstration for Municipal Solid Waste Landfill Unit/s		
Attach the following:	Location of Documents	
Description of activity for which a Research, Development and Demonstration permit is sought		
Description of demonstrable project goals		
Demonstration that the MSWLF unit is not a source or potential source of contamination		

Demonstration that leachate depth on the liner will be maintained at one foot (30 cm) or less	
For alternative final cover proposals, a demonstration that infiltration of liquids will not cause contamination of groundwater or surface water	
Description of the quantity and type of liquids to be introduced and method for adding liquids	
Demonstration that the leachate discharge or containment system has capacity for additional liquids	
Description of monitoring or testing to measure progress in attaining project goals	
Engineering reports, plans and specifications	
Additional information required by the jurisdictional health department	
☐ Collection/Transportation Vehicle per King County BOH Chapter 10.05.	
	Location of Documents
Provide information on each Collection/Transportation Vehicle (as an attachment to this permit application) as follows:	
Make, Model, and License plate number, and the location where the vehicles will be parked at night.	
Provide information on the facility where the vehicles are maintained, including plan view of the vehicle service area, whether this area drains to sewers or not, etc.	
Additional information required by the jurisdictional health department	
☐ Composting Facilities	
Attach the following:	Location of Documents
Attach the following:  Engineering reports, plans and specifications that address the design standards of WAC 173-350-220(3)	Location of Documents
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Engineering reports, plans and specifications that address the design standards of WAC 173-350-220(3)  A plan of operation meeting the requirements of WAC 173-350-220(4)	Location of Documents
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Engineering reports, plans and specifications that address the design standards of WAC 173-350-220(3)  A plan of operation meeting the requirements of WAC 173-350-220(4)  A closure plan meeting the requirements of WAC 173-350-220(6)	Location of Documents
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Engineering reports, plans and specifications that address the design standards of WAC 173-350-220(3)  A plan of operation meeting the requirements of WAC 173-350-220(4)  A closure plan meeting the requirements of WAC 173-350-220(6)  Additional information required by the jurisdictional health department  Land Application  Attach the following:  Contact information as required by WAC 173-350-230(8)(a)(i)	
Engineering reports, plans and specifications that address the design standards of WAC 173-350-220(3)  A plan of operation meeting the requirements of WAC 173-350-220(4)  A closure plan meeting the requirements of WAC 173-350-220(6)  Additional information required by the jurisdictional health department  Land Application  Attach the following:  Contact information as required by WAC 173-350-230(8)(a)(i)  Statement of intended use as required by WAC 173-350-230(8)(a)(ii)	

Additional information required by the jurisdictional health department	
	'
☐ Energy Recovery and Incineration Facilities	
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design of storage and handling facilities on-site for incoming waste as well as fly ash, bottom ash and any other waste produced by air or water pollution controls	
Engineering reports, plans and specifications that address the design of the incinerator or thermal treater, including charging or feeding systems, combustion air systems, ash handling systems, and air pollution and water pollution control systems. Include design of instrumentation and monitoring systems	
A plan of operation meeting the requirements of WAC 173-350-240(4)	
A closure plan meeting the requirements of WAC 173-350-240(6)	
Plan for meeting landfill operator certification per chapter 173-300 WAC, Certification of Operators of Solid Waste Incinerator and Landfill Facilities	
Additional information required by the jurisdictional health department	
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☐ Anaerobic Digesters	
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design standards of WAC 173-350-250(4)	
A plan of operation meeting the requirements of WAC 173-350-250(5)	
A closure plan meeting the requirements of WAC 173-350-250(7)	
Additional information required by the jurisdictional health department	
	,
Intermediate Solid Waste Handling Facilities (Material Recovery Facility, Transand Compaction Site)	nsfer Station, Baling
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design standards of WAC 173-350-310(4)(a)	
A plan of operation meeting the requirements of WAC 173-350-310(5)	
A closure plan meeting the requirements of WAC 173-350-310(7)	
Additional information required by the jurisdictional health department	
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☐ Intermediate Solid Waste Handling Facilities (Drop Boyes)	

Attach the following:	<b>Location of Documents</b>
Engineering reports, plans and specifications that address the design standards of WAC 173-350-310(4)(b)	
A plan of operation meeting the requirements of WAC 173-350-310(5)	
A closure plan meeting the requirements of WAC 173-350-310(7)	
Additional information required by the jurisdictional health department	
☐ Piles for Treatment and Storage	
Attach the following:	Location of Documents
The design of fire control features	
Engineering reports, plans and specifications that address the design standards of WAC 173-350-320(3)	
A plan of operation meeting the requirements of WAC 173-350-320(4)	
A closure plan meeting the requirements of WAC 173-350-320(6)	
Additional information required by the jurisdictional health department	
☐ Surface Impoundments and Tanks	
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design standards of WAC 173-350-330(3)	
A plan of operation meeting the requirements of WAC 173-350-330(4)	
For surface impoundments not equipped with a leak detection layer, hydrogeologic reports and plans that address the requirements of WAC 173-350-330(5)	
A closure plan meeting the requirements of WAC 173-350-330(6)	
Additional information required by the jurisdictional health department	
☐ Waste Tire Storage	
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design standards of WAC 173-350-350(5)	

Documentation as needed to meet the financial assurance requirements of WAC 173-350-350(9)

A plan of operation meeting the requirements of WAC 173-350-350(6)

A closure plan meeting the requirements of WAC 173-350-350(8)

Additional information required by the jurisdictional health department	
Attach the following:	Location of Documents
Engineering reports, plans and specifications that address the design standards of WAC 173-350-360(5)	
A plan of operation meeting the requirements of WAC 173-350-360(6)	
A closure plan meeting the requirements of WAC 173-350-360(8)	
Documentation as needed to meet the financial assurance requirements of WAC 173-350-360(9)	
Additional information required by the jurisdictional health department	
El Limited Domeses Leadille	
Limited Purpose Landfills	Landing of Barring
Attach the following:	Location of Documents
Demonstrations that the facility meets the location standards of WAC 173-350-400(2)	
Engineering reports/plans and specifications that address the design standards of WAC 173-350-400(3)	
A plan of operation meeting the requirements of WAC 173-350-400(4)	
Hydrogeologic reports and plans that address the requirements of WAC 173-350-400(5)	
A closure plan meeting the requirements of WAC 173-350-400(6)	
A post-closure plan meeting the requirements of WAC 173-350-400(7)	
Documentation as needed to meet the financial assurance requirements of WAC 173-350-400(8)	
Documentation that owners of property located within 1,000 feet of the landfill boundary have been notified that the proposed facility may impact their ability to construct water supply wells, in accordance with Chapter 173-160 WAC, Minimum Standards for Construction and Maintenance of Wells.	
Plan for meeting landfill operator certification per chapter 173-300 WAC, Certification of Operators of Solid Waste Incinerator and Landfill Facilities	
Additional information required by the jurisdictional health department	
☐ Inert Waste Landfill	
Attach the following:	Location of Documents
Engineering reports/plans and specifications that address the design standards of WAC 173-350-410(3)	
A plan of operation meeting the requirements of WAC 173-350-410(4)	

Documentation that all owners of property located within 1,000 feet of the landfill boundary have been notified that the proposed facility may impact their ability to construct water supply wells, in accordance with Chapter 173-160 WAC, Minimum Standards for Construction and Maintenance of Wells (WAC 173-350-410(8)(c))					
Plan for meeting landfill operator certification per chapter 173-300 WAC, Certification of Operators of Solid Waste Incinerator and Landfill Facilities					
Additional information required by	the jurisdiction	al health departme	ent		
Attachments					
For a facility/activity to be per	mitted under ch	napter 173-350 W	AC, attach a vicinity plan	or map per WAC 173-	-350-715(d)
For a facility permitted under	chapter 173-35	1 WAC, attach a v	vicinity plan or map per W	/AC 173-351-730(5)(a	ı)(iii)(B)
Attach evidence of authority to	o sign this pern	nit application per	WAC 173-351-730(7) or	WAC 173-350-715(3)	(for example, a
printout from the Washington	Secretary of St	ate for corporation	s, or printout from a gove	ernment website)	
Attach evidence of compliand	ce with chapter	197-11 WAC, SE	PA rules		
	PA	RT 4. Facili	ity Information		
Facility Physical Address:			Responsible Official Name	e and Position at Facility:	
			DI DI		
			Phone: E-mail:		
Facility Mailing Address (if different):			E mail.		
, <b>, ,</b>			Facility phone:		
Facility Location (at front gate)	D		1 - 44	l an aite da	
Section Township  Location Description	K	ange	Latitude	Longitude	<b>)</b>
Location Description					
Legal Description of Site					
Property Tax Account Number(s)			Facility Site Zoning		
Required or Existing Permits at the Facility Site					
Type of permit (check box)	Need to Obtain		Existir	g Permit	
		Regu	lating Authority	Permit #	Expiration Date
Solid waste permit					
☐ Biosolids permit					
State waste discharge permit					
Conditional use permit					
Stormwater permit					
Hydraulic permit					

DNR Surface mining permit						
Flood control permit						
Fire permit						
Wetlands permit						
Air operating permit						
DNR Forest Practices						
Other						
Other						
Mark the solid waste handling activitie	s/facilities that are alread	dy taking place.				
<ul> <li>Municipal solid waste landfill per chapter 173-351 WAC</li> <li>☐ Recycling facility per WAC 173-350-210</li> <li>☐ Composting per WAC 173-350-220</li> <li>☐ Land application per WAC 173-350-230</li> <li>☐ Energy recovery and incineration per WAC 173-350-240</li> <li>☐ Anaerobic digesters per WAC 173-350-250</li> <li>☐ Intermediate solid waste handling per WAC 173-350-310</li> <li>☐ Material recovery facility</li> <li>☐ Transfer station</li> <li>☐ Bailing and compaction site</li> <li>☐ Drop Box</li> <li>☐ Piles used for storage or treatment per WAC 173-350-330</li> <li>☐ Surface impoundment per WAC 173-350-330</li> <li>☐ Waste tire storage per WAC 173-350-350</li> <li>☐ Moderate risk waste per WAC 173-350-360</li> <li>☐ Limited MRW per WAC 173-350-400</li> <li>☐ Inert waste landfill per WAC 173-350-410</li> <li>☐ Other per WAC 173-350-490 (specify)</li> </ul>		0				
LI Drop Box						
			PART 4. Additional Contact Information			
PART 4. Additional	Contact Informati	on				
	Contact Informati	on				
Facility (attach additional sheets if	Owner(s) more than one facility owner)	on				
Facility	Owner(s)	on				
Facility (attach additional sheets if	Owner(s) more than one facility owner)	on				
Facility (attach additional sheets if Responsible Official:	Owner(s) more than one facility owner) Contact Name (if different):	on				
Facility (attach additional sheets if Responsible Official:  Company Name, Government Entity, etc.:	Owner(s) more than one facility owner) Contact Name (if different):	on				
Facility (attach additional sheets if Responsible Official:  Company Name, Government Entity, etc.:	Owner(s) more than one facility owner) Contact Name (if different):  Contact Mailing Address :	on				
Facility (attach additional sheets if responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:	Owner(s) more than one facility owner) Contact Name (if different): Contact Mailing Address :  Contact phone: E-mail:					
Facility (attach additional sheets if a Responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same	Owner(s) more than one facility owner) Contact Name (if different): Contact Mailing Address :  Contact phone: E-mail:					
Facility (attach additional sheets if a Responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same	Owner(s) more than one facility owner) Contact Name (if different): Contact Mailing Address:  Contact phone: E-mail:					
Facility (attach additional sheets if a graph of the company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same (attach additional sheets if metallic she	Owner(s) more than one facility owner) Contact Name (if different): Contact Mailing Address:  Contact phone: E-mail:  e as Facility Owner(s)					
Facility (attach additional sheets if a Responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same (attach additional sheets if m Responsible Official:	Owner(s) more than one facility owner)  Contact Name (if different):  Contact Mailing Address:  Contact phone: E-mail:  e as Facility Owner(s) YE pore than one facility operator)  Contact Name (if different):					
Facility (attach additional sheets if responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same (attach additional sheets if meaning the responsible Official:  Company Name, Government Entity, etc.:	Owner(s) more than one facility owner)  Contact Name (if different):  Contact Mailing Address:  Contact phone: E-mail:  e as Facility Owner(s) YE pore than one facility operator)  Contact Name (if different):					
Facility (attach additional sheets if a Responsible Official:  Company Name, Government Entity, etc.:  Position in Company or Government Entity:  Facility Operator(s) Same (attach additional sheets if mattach additional	Owner(s) more than one facility owner)  Contact Name (if different):  Contact Mailing Address :  Contact phone: E-mail:  as Facility Owner(s) Yestore than one facility operator)  Contact Name (if different):  Contact Mailing Address :  Contact Mailing Address :					

Property Owner Name:	Contact Name (if different):
	Contact Mailing Address :
	Contact phone:
	E-mail:

PART 5. Signature and Verification of Applicant (Refer to WAC 173-351-730(7) for appropriate signing authority)		
	am familiar with the information submitted in this application and le for providing the information, I believe the information is true,	
(Applicant's Signature – printed)	(Title)	
(Applicant's Signature)	(Date)	
PART 6. Notary F	Public Verification	
State of		
County of		
Signed or attested before me on	by	
(seal or stamp)	(Signature)  My appointment expires:	

(Date)